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ABSTRACT

A study of 66 female and 56 male nurses employed in central Florida investigated the relationship between nursing experience and sex-role orientation and values. Nursing experience and degrees were similarly distributed across genders in the sample of nurses. The Bem Sex Role Inventory, a checklist of stereotypically feminine and masculine adjectives, and the Study of Values, an inventory of interest in and valuing of six areas (theoretical, economic, aesthetic, social, political, religious) were administered to each subject. Results indicated the male nurses scored significantly higher on Bem masculine items than the female nurses, and the female nurses scored higher on Bem feminine items than the men. Males were distributed across sex-role categories in about the same proportions as females. More female nurses were cross-typed than males. On the Study of Values, males scored slightly higher than females on economic and political values and slightly lower on social and religious values, just as non-nurse adult males do. Further analysis of the data for influence of career progression and specialty and comparison with another, similar study supported the finding of a lack of stereotypically feminine traits in male nurses. Implications for nursing student recruitment are considered. Contains 15 references. (MSE)

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MALE NURSES: MORE LIKE JOHN DOE THAN JANE DOE

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MALE NURSES: MORE LIKE JOHN DOE THAN JANE DOE

Scores on the Bem Sex-role Inventory and the Study of Values were compared for 66 female nurses and 56 male nurses in central Florida. The men were frequently categorized as sex-typed and rarely as cross-typed. On the Study of Values the overall pattern of values for male nurses was very similar to that of the average male nonnurse and significantly different from that of female nurses on the theoretical and aesthetic scales. Nursing experience, age, and highest degree earned in nursing were not correlated with any Bem Scores or Study of Values scores. No support was found for the idea that nursing feminizes male nurses. Implications of these results for the recruitment of male nursing students were discussed.

MALE NURSES: MORE LIKE JOHN DOE THAN JANE DOE

There is some evidence that male nurses have public images that are more effeminate than most men (Culkin, Tricarico, & Cohen, 1987; Pontin, 1988; Streubert & O'Toole, 1991), and that some males are dissuaded from choosing nursing as a career for this reason (Garvin, 1976; Vaz, 1968). Among those males who do choose nursing some have reported that they had difficulty telling others they had selected nursing as a career (Schoenmaker & Radosevich, 1976), and others have made spontaneous comments about effeminate male nurses (Greenberg & Levine, 1971).

Does the public image correspond to scores on personality measures? Results of a few previous studies suggest that the answer is "yes." Aldag and Christensen (1967) used the short form of the MMPI to show that male nursing students were more similar in scores on personality scales to female nursing students than they were to male nonnursing students. Aldag (1970) noted on the Strong Vocational Interest Blank that male nursing students showed interests described as "more feminine" than those male college students in other fields (p. 533).

Other investigations have yielded mixed results. Using the Bem Sex-role Inventory (Bem, 1981) 4 out of a sample of 20 male nursing students were cross-sex-typed (scored as having behaviors and attitudes typical of the opposite sex) as contrasted with 4 out of a sample of 48 female nursing students. However, the percentages of male and female nursing students categorized as androgynous and sex-typed were very similar (Culkin, Tricarico, & Cohen, 1987). Garvin (1976) compared 34 male nursing students

with 841 female nursing students on the Study of Values (Allport, Vernon, & Lindzey, 1970). As compared with general college males the male nursing students scored higher on social and esthetic scales, and lower on economic and political scales. Such a pattern is similar to the average scores for women. However, male nursing students scored higher than female student nurses on the theoretical scale and lower on the religious scale, just as the average male nonnurse does.

Kantner and Ellerbusch (1980) compared the sex-role orientation of 27 male nurses and 27 male high school teachers. They found no significant relationship between sex-role orientation and occupational choice. Pontin (1988) gave the Bem Sex Role Inventory to 25 male and 25 female British nurses. Using Motowidlo's (1981) scoring system the two groups scored equally androgynous. Also, the men scored about one standard deviation above females on the masculine profile and about one standard deviation below on the feminine profile. Taken together these two studies argue against the hypothesis that male nurses are like female nurses in sex-role orientation.

The apparently conflicting findings reviewed above make it difficult to draw firm conclusions about the personalities and interests of male nurses. Even if all the results did point in the same direction it would still be necessary to interpret them cautiously. Astute readers have doubtless noted that the samples in these studies are small, and some have been nursing students, rather than nurses. This makes it impossible to assess whether nursing practice affects the personalities of males who choose

the nursing profession. It seems possible that male and female nursing students would tend to have personalities heavily influenced by society's gender role expectations. But it is also conceivable that ten years of common experiences as nurses might lead to some convergence in both personality and values. Finally, it has been noted that the type of male who chooses the nursing profession may have changed since the late sixties (Mlott, Rust, Assey, & Doscher, 1986).

The purpose of the present study was to test a larger sample of male nurses with varying amounts of experience, to permit tentative conclusions about the relationship beteen nursing experience and sex-role orientation and values.

METHOD

Subjects

The subjects were 56 male (M yr. = 38.6, SD = 8.3) and 66 female (M yr. = 37.2, SD= 8.3) nurses currently employed in the Orlando metropolitan area. Ages ranged from 23 to 62 years. The mean number of years of nursing experience was 12.5 (SD = 8.1) for males and 12.8 (SD = 7.5) for females. Both age and nursing experience differences were nonsignificant using *t* tests. Eleven subjects were LPNs, two had MSNs, 42 had BSNs, and 67 had associate degrees in nursing. Degrees were similarly distributed across gender.

Procedure

Early in the term 13 RNs enrolled in a nursing research course and five students in a psychological testing course were given a covering page containing general questions about the

respondents, the Bem Sex Role Inventory, and the Study of Values. Each student received instructions on both the scoring of the tests and the responsibilities of testers to their subjects. Each recruited either three male and five female nurses or four of each. Subjects were asked to participate in a study of the personalities of nurses. They were assured of complete confidentiality and told that some general feedback would be provided in a few weeks. The order of the two tests was reversed for about half of the subjects to reduce the likelihood of an order effect. Most subjects were recruited at work where they could not complete the questions immediately, but did so as soon as they were free from distractions. Six persons approached declined to participate, and booklets from 22 subjects were returned incomplete or otherwise unusable because they did not follow instructions. Of these, 13 were female and 9 were male.

Inventories

The covering page was designed by the author and three nursing students. Subjects were asked not to identify themselves, but they were told that no one would see their scores except members of the research team. Subjects were asked for age, gender, number of years of nursing experience, highest degree in nursing, and the "area of nursing in which you are currently working."

The Bem Sex Role Inventory is a 60-item adjective checklist of 20 items that are stereotypically feminine ("cheerful," "compassionate"), 20 that are stereotypically masculine ("independent," "forceful"), and 20 buffer items. Subjects

indicated on a 7-choice scale how true of them was each adjective. Bem's (1981) scoring system was used to categorize subjects as androgynous (possessing qualities of both genders), sex-typed (masculine males, feminine females), cross-typed (feminine males, masculine females), and undifferentiated (low scores on both).

The Study of Values (Allport, et al, 1970) is a 120-item test on which each subject responds to items on six values or interests: theoretical, economic, aesthetic, social, political, and religious. The test is constructed so 40 is the mean for the adult population for each value. A person with a score of 50 on the religious scale is likely to place great value on religion and be interested in religious issues. Both inventories have adequate reliability, validity, and norms.

RESULTS

None of the demographic variables of age, number of years of nursing experience, and highest degree in nursing correlated significantly with Bem raw scores and scores on the Study of Values (*rs* ranged from -.15 to +.17). These results, along with nonsignificant findings of tests for homogeneity of variance, permitted the use of *t* tests to compare male and female nurses on Bem raw scores and the six scales of the Study of Values. Male nurses scored significantly higher on Bem-M scores ($t_{120} = 2.9$, $p < .01$) and significantly lower on Bem-F scores ($t_{120} = 4.9$, $p < .001$). Moreover, the assignment of each subject to categories using Bem's scoring system (1981) showed no significant

Insert Table 1 about here

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relationship between sex-role category and gender (X^2 = 6.4, contingency coefficient = .22). Thus males were distributed across categories in about the same proportions as females. Of particular interest is the fact that only seven percent (n = 4) of the male nurses were cross-typed compared with 11 percent (n = 7) of the female nurses.

On the Study of Values nonsignificant differences between male and female nurses were obtained for economic, social, political, and religious values. However, for all four scales the differences were consistent with normative trends for nonnurse adults (Allport, et.al., 1970). Specifically, male nurses scored slightly higher on economic and political values and slightly lower than female nurses on social and religious values, just as nonnurse adult males do. Male nurses (M = 41.7, SD = 5.7) scored higher on the theoretical scale (t_{120} = 3.06, $p < .01$) than female nurses (M = 41.6, SD = 6.1). The direction of these significant differences was also consistent with normative data.

Discussion

It could be argued that the lack of feminine scores of male nurses might result from male nurses moving into leadership positions (Okrainec, 1994; Streubert & O'Toole, 1991), where presumably they might be more likely to influence rather than be influenced. To rule out this possibility subjects were categorized by nursing specialty. Seven categories contained

seven or more subjects: critical care, PACU/surgical, geriatric/long term, home health, ortho/rehab, medical/pediatric, and administration. There was no significant relationship between nursing specialty and gender (X = 7.82, contingency coefficient = .25).

Further evidence for a lack of femininity of male nurses lies in a comparison of the sex-role categorization from the present study with Culkin, et al. (1987). Such a comparison is possible because the method of categorizing was the same. If there is a feminizing influence then male nurses should be more likely to be androgynous and cross-typed than male nursing students. Thirty percent (n = 6) of their male nursing students were androgynous and 20 percent (n = 4) were cross-typed, as compared with 21 and 7 percent (ns = 12, 4) respectively in the present study.

Caution is necessary in interpreting these results, since changes in the nursing profession over a nine-year span may have occurred. Also, it is possible that cross-typed and androgynous males are drawn to nursing studies, but attrition may favor those with masculine characteristics.

A crude comparison with Garvin's (1976) male nursing students at Ohio State with male nurses from the present study shows no consistent feminizing trend. Garvin's males scored more like nonnurse males on the religious scale (35.7 to 39.1) but less like nonnurse males on the economic scale (39.2 to 42.0).

There were also no significant correlations between nursing experience and any Bem or Study of Values scores in the present

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study. Male nurses who had worked for many years in the profession had scores on the measures used that were no more "feminine" than scores of relatively inexperienced male nurses.

As noted earlier, both male nursing students and males who might choose to become nurses have expressed concern over entering what has been perceived as a feminine profession. In the near future more males than ever before may have nursing recommended to them as a professional option (Okrainec, 1994). The present study strongly suggests that the term "masculine nurse" is not necessarily a contradiction. Well-qualified males concerned about the feminine stereotype of nursing or a possible feminizing influence can and should be reassured by the results of this study.

Stereotypes are often difficult to erase. Perhaps the present results, which indicate that male nurses are more like John Doe than Jane Doe, may modify that stereotype.

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TABLE 1

Percentage of Subjects in Bem Sex-role Categories by Gender

	Androgynous	Sex-typed	Cross-sex	Undifferentiated
Female	40	31	11	18
Male	21	48	7	23